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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. §1.53(b))

Attorney Docket No. PC10759A

First Named Inventor or Application Identifier Yuhpyng L. Chen

Title CORTICOTROPIN RELEASING FACTOR ANTAGONISTS

Express Mail Label No. EL162815290US

**APPLICATION ELEMENTS**  
 See MPEP chapter 600 concerning utility patent application contents.

- 1.
- 
- \*Fee Transmittal Form (e.g., PTO/SB/17)
- 
- (Submit an original, and a duplicate for fee processing)

- 2.
- 
- Specification [Total Pages 124] (preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference in Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (*if filed*)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

- 3.
- 
- Drawing(s) (35 U.S.C. 11.3) [Total sheets ]

- 4.
- 
- Oath or Declaration [Total pages ]

- a.  Newly executed (original or copy)
  - b.  Copy from a prior application (37 CFR §1.63(d))  
(for continuation/divisional with Box 17 completed)
- [Note Box 5 below]**

- i.  DELETION OF INVENTOR(S)  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§1.63(d)(2) and 1.33(b).

- 5.
- 
- Incorporation By Reference (useable if Box 4b is checked)
- 
- The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ADDRESS TO:  
Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- 6.
- 
- Microfiche Computer Program (Appendix)

7. Nucleotide and/or Amino Acid Sequence Submission
- 
- (if applicable, all necessary)

- a.  Computer Readable Copy
- b.  Paper Copy (identical to computer copy)
- c.  Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

- 8.
- 
- Assignment Papers (cover sheet & document(s))

- 9.
- 
- 37 C.F.R. §3.73(b) Statement
- 
- Power of Attorney
- 
- (when there is an assignee)

- 10.
- 
- English Translation Document (if applicable)

- 11.
- 
- Information Disclosure Document (IDS)/PTO-1449
- 
- Copies of IDS Citations

- 12.
- 
- Preliminary Amendment

- 13.
- 
- Return Receipt Postcard (MPEP 503)
- 
- (Should be specifically itemized)

- 14.
- 
- \*Small Entity
- 
- Statement filed in prior application, Statement(s) (PTO/SB/09-12)
- 
- Status still proper and desired

- 15.
- 
- Certified Copy of Priority Document(s)
- 
- (if foreign priority is claimed)

- 16.
- 
- Other: Priority Claim of U.S. Provisional Application
- 
- 60/176,611, filed January 18, 2000

**\*NOTE FOR ITEMS 1, 5-16: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation     Divisional     Continuation-in-part (CIP)    of prior application No.: /

Prior application information: Examiner \_\_\_\_\_

Group/Art Unit: \_\_\_\_\_

**18. CORRESPONDENCE ADDRESS** Customer Number or Bar Code Labelor  Correspondence address below

Name	23913		
Address			
Address			
City	State	Zip Code	
Country	Telephone	Fax	

NAME (Print/type)	Kristina L. Konstas	Registration No. (Attorney/Agent)	37,864
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Signature	Kristina L. Konstas	Date	Jan. 17, 2001
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EXPRESS MAIL NO. EL162815290US

UTILITY TRANSMITTAL PTO SB 05, 3/99, (1/1)

**FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1.  
These are the fees effective October 1, 1997.

**Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid.** See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

Total Amount of Payment (\$746.00)

**METHOD OF PAYMENT** (check one)

The commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-1445

Deposit Account Name Pfizer Inc

Charge Any Additional Fee Required Under 37 C.F.R. §§ 1.16 and 1.17       Charge the Issue Fee Set in 37 C.F.R. § 1.18 at the Mailing of the Notice of Allowance.

Payment Enclosed:

Check     Money Order     Other

**FEE CALCULATION** (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
128	240	128	240	Submission of Information Disclosure Statement	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	248	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
Other Fee (specify)					
Other Fee (specify)					
Reduced by Basic Filing Fee Paid				SUBTOTAL (3) (\$)	0.00

**SUBMITTED BY**

Type or Printed Name Kristina L. Konstas

Signature

Date

**Complete (if Applicable)**

Reg. Number 37,864

Deposit Account

User ID 16-1445